

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.A.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>	KL	JC5/705	5/4/01 05/22/01
<b>RESPONSE FORMALITY REVIEW</b>	CC	JUL114	9-28-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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9/29/01